

URBAN DISTRICT COUNCIL OF BUDE/STRATTON

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year 1968

Health Area Office,
Launceston,
Cornwall

WILLIAM PATERSON, M.B., Ch.B., D.P.H.
Medical Officer of Health



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URBAN DISTRICT COUNCIL OF BUDE/STRATTON

Members of Housing & Public Health Committee: 1968/69

S.LUCAS (Chairman)

T.J.McMAHON (Vice-chairman)

E.H.Chadd

V.G.Elsworthy

Miss M.M.Francis

D.J.Jackson

N.T.Keat

G.H.T.Medland (resigned 10.4.69)

J.F.R.Sanderson

L.D.Wilkes

B.A.Burrow

M.R.Fleetwood

J.E.Gardiner

A.A.Seymour

Mrs.C.R.Ward, J.P.

E.Worden

A.C.Brock

H.F.Craig Harvey

- - - - -

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY :

MEDICAL OFFICER OF HEALTH

WILLIAM PATERSON, M.B. Ch.B.,D.P.H.

also holds appointments of :

Medical Officer of Health :

Stratton Rural District Council

Launceston Rural District Council

Camelford Rural District Council

Launceston Borough Council

Health Area Medical Officer, Area No. 6 Cornwall County Council

School Medical Officer, Cornwall County Council

SENIOR PUBLIC HEALTH INSPECTOR :

P.DURSTON, M.A.P.H.I.

SUMMARY OF VITAL STATISTICS

Area (in acres)	4,294
Population	5,280
No. of separate dwellings occupied	2,150
Rateable Value 1968	£224,442
Product of ld. rate	£887

	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate per 1,000 estimated population</u>
<u>Live Births</u>				
Legitimate	62	35	27	11.9
Illegitimate	1	-	1	
<u>Stillbirths</u>	2	1	1	31
<u>Deaths (all causes)</u>	95	53	42	18.0

Deaths from Puerperal Causes :-

Puerperal and post-abortive)	
sepsis)	N I L
Other Puerperal Causes)	

Infant Mortality (Deaths under 1 year per 1,000 live births)

1	-	1	16.0
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	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths from Cancer (all ages)	15	6	21
Measles (all ages)	1	-	1
Whooping Cough (all ages) -	-	-	-
Diarrhoea (under 2 years) -	-	-	-

TO THE CHAIRMAN AND COUNCILLORS OF THE URBAN
DISTRICT COUNCIL OF BUDE/STRATTON.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1968.

The vital statistics show that the number of deaths was eight more than in the previous year, while the number of births was four fewer than in 1967. The adverse balance of deaths over births increased, but the Registrar-General's estimate of the mid-year population showed an increase of 70. . Heart disease, cancer and cerebrovascular disease, in that order, headed the list of causes of death. One infant death and two stillbirths were recorded, as was the death of one child due to measles.

It will be noticed that the Mortality Table on page 5 differs from the familiar table previously given. This is because the Registrar-General now classifies deaths in accordance with a list of 65 headings in place of the 36 headings formerly used. Due to the length of the new list, headings to which no deaths have been assigned, are not included in the table. A change of terminology may also be noted in some of the causes of death. Thus "vascular lesions of the nervous system" now appear as "cerebrovascular disease", while "coronary disease, angina" comes under the heading of "ischæmic heart disease."

The incidence of infectious disease was low. 39 cases of measles were notified. On 1st October, 1968, the Health Services and the Public Health Act, 1968 and the Public Health (Infectious Diseases) Regulations, 1968 came into operation. These made certain changes in the infectious diseases required to be notified to the Medical Officer of Health, and in the procedure connected with notification.

In the environmental circumstances of the District, progress on housing continued, with the completion of the old person's bungalows and other houses. Investigations into the new sewerage scheme were pursued, with a decision, towards the end of the year, to put in hand the preparation of an alternative scheme for consideration.

I must express my thanks to Mr. Durston, the Council's Senior Public Health Inspector, for the valuable assistance he has given in all aspects of our work together, and in the preparation of this report, for which he has supplied the bulk of the information dealing with the sanitary circumstances of the District. The Council's other Departments have continued their willing co-operation. I am grateful to the General Practitioners of the District for their continued co-operation.

Once again, it is a pleasure to express my appreciation of the help and encouragement I have received from the Council, and, in particular, from the Chairman and members of the Public Health Committee.

I have the honour to be,

Your obedient Servant,

WILLIAM PATERSON

Natural and Social Conditions

Area (in acres) 4,294. The Urban District of Bude/Stratton is partly a health and seaside resort and partly agricultural in character. It is bounded on its western border by the Atlantic Ocean, the coast-line in this particular part of north Cornwall running almost due north and south.

Whilst the hinterland is undulating and hilly in character, contour heights seldom rise over 500 feet and this no doubt is in part the explanation for the exceedingly moderate rainfall figures (average annual rainfall for 20 years 33.74"), which in view of exposure to the prevailing south westerly winds, might be expected to be considerably higher.

Population - The Registrar General has estimated the population for the mid-year 1968 to be 5,280, an increase of 70 on the previous year. In 1968 there were 63 births and 95 deaths, 32 more deaths than births.

Deaths - The total number of deaths assigned to the District for the year was 95, compared with 87 in 1967. The crude death rate based on the mid-year population was 18.0, compared with 16.7 in 1967. The following table has been compiled for comparison with previous years.

<u>Year</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded Rate</u>
1964	72	36	36	14.09
1965	82	31	51	15.89
1966	107	55	52	20.57
1967	87	46	41	16.70
1968	95	53	42	18.0

In order to compare the mortality in the District with the mortality for England and Wales, it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as 0.66 for this District.

The Standardised Death Rate, therefore, is 11.88 which may be compared with that of 11.9 (provisional) for England and Wales.

Births - The number of live births assigned to this District was 63 compared with 67 in 1967. The rate per thousand of the population is 11.9. When the Registrar General's Area Comparability Factor for births (1.25) is applied to this figure, the Standardised Birth Rate of 14.875 for this District compares with 16.9 (provisional) for England and Wales.

Stillbirths - There were two stillbirths during 1968.

Illegitimate Births - There was one illegitimate birth assigned to the District during the year, compared with two in 1967. Shown as a proportion of the total number of live births, this represents 1.6 per cent.

Maternal Mortality - No maternal deaths were recorded during the year.

Infant Mortality - There was one infant death in 1968
F. 4 weeks. Congenital Malformation

N.B. Vital Statistics. It is important that too much weight should not be attached to small variations in these rates from one year to another, particularly where relatively small populations are involved - attention should rather be paid to the trend of these rates over a period of years.

MORTALITY TABLE

Classified in accordance with 65 headings based
on the Abbreviated List of the International
Statistical Classification of Diseases, Injuries
and Causes of Death, 1967.

<u>Cause of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Tuberculosis of Respiratory System	1	-	1
Measles	1	-	1
Malignant neoplasm - stomach	2	1	3
Malignant neoplasm - lung, bronchus	8	-	8
Malignant neoplasm - breast	-	3	3
Malignant neoplasm - uterus	-	1	1
Leukaemia	1	-	1
Other malignant neoplasms, etc.	5	1	6
Hypertensive disease	-	1	1
Ischaemic heart disease	13	14	27
Other forms of heart disease	3	1	4
Cerebrovascular disease	7	6	13
Other diseases of circulatory system	2	1	3
Pneumonia	5	4	9
Bronchitis and emphysema	2	-	2
Other diseases of digestive system	-	2	2
Nephritis and nephrosis	-	1	1
Hyperplasia of prostate	1	-	1
Other diseases, genito-urinary system	-	2	2
Congenital anomalies	-	1	1
Symptoms and ill-defined conditions	1	-	1
All other accidents	-	1	1
Suicide and self-inflicted injuries	1	1	2
All other external causes	-	1	1
	53	42	95

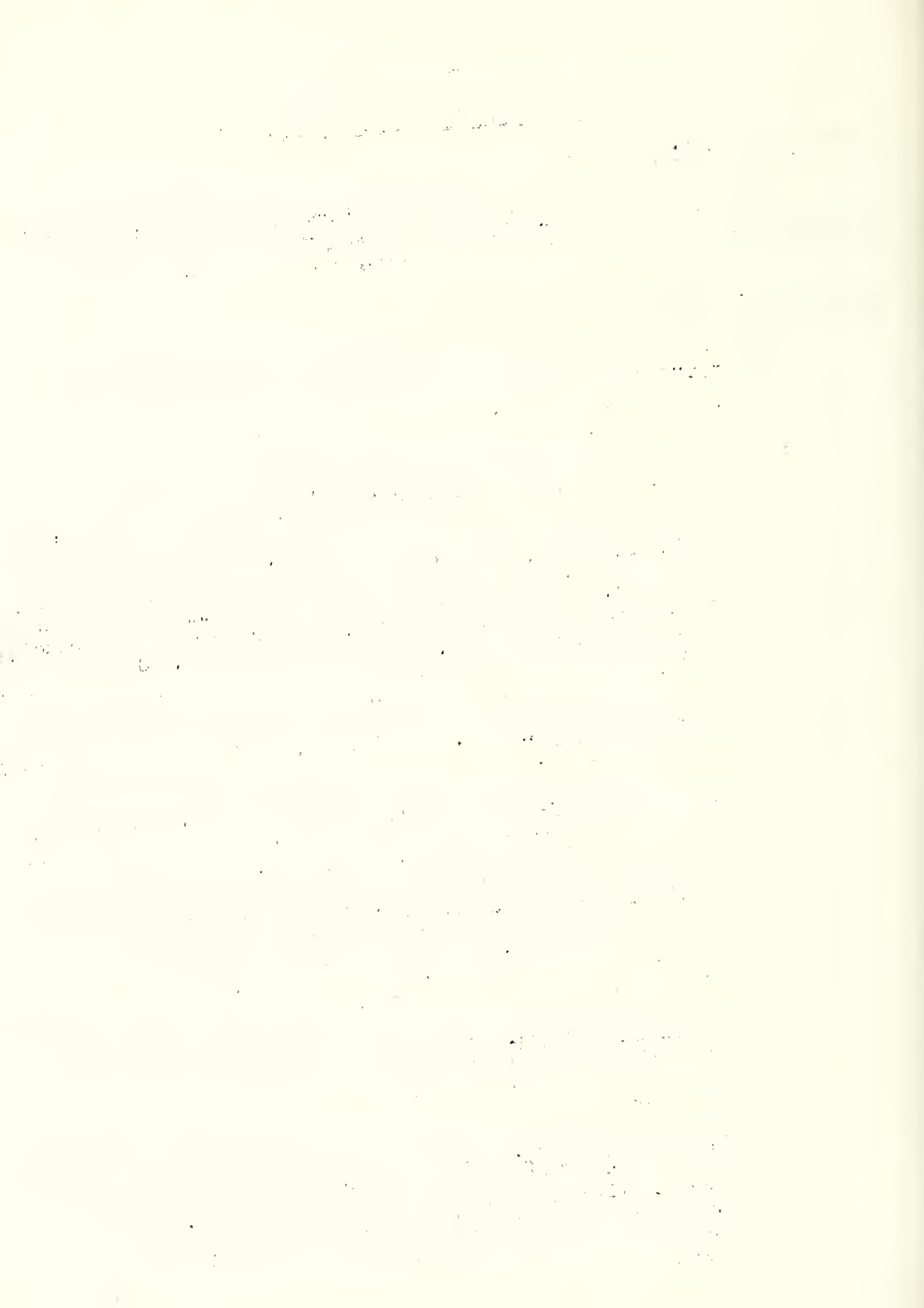
GENERAL PROVISION OF HEALTH SERVICES

General Medical Services

General medical services under Part IV of the National Health Service Act, 1946, are provided by medical practitioners resident in the district, and in adjoining districts, all of whom undertake maternity medical services.

County Council Services

- I Health Department. The County Council is the local health authority for the purposes of Part III of the National Health Service Act, 1946, and provides the following services in the district : -
- (a) Midwifery and Home Nursing. Nurse-midwives are provided to attend general nursing and midwifery cases in the home.
 - (b) Health Visiting. Health Visitors are available to give advice on health matters in the home or at the clinic. Originally concerned with the care of mothers and young children, which is still their basic function, they are increasingly concerned with other age groups, particularly the aged. Some health visitors combine this work with general nursing and midwifery. All act also as school nurses.
 - (c) Child Welfare Centre. A Child Welfare Clinic is held monthly at the Castle, Bude.
 - (d) Dental Clinic. Priority dental treatment for expectant and nursing mothers and pre-school children is available at the Dental Clinic held at the Castle, Bude.
 - (e) Vaccination and Immunisation. Facilities for vaccination against smallpox and immunisation against diphtheria, whooping cough and tetanus, and for poliomyelitis vaccination, are provided at the Child Welfare Clinic or by the supply of materials to the family doctor.
 - (f) Home Help Service. Home helps are employed to provide domestic help for households in certain circumstances, a charge being made for this service according to the means of the person concerned.
 - (g) Ambulance Service. A service of ambulances for the conveyance of sick, accident and emergency cases is provided. For sitting cases, utilecon sitting case vehicles are used. When appropriate, some such cases are carried by the Hospital Car Service, a voluntary organisation. Day-to-day administration of the service is carried out from Ambulance Control, Bodmin.



(h) Prevention of Illness, Care and After-care.

A full-time tuberculosis health visitor is provided for the care and after-care of tuberculous persons. District nurses are available to assist in the home treatment of such persons when required by the Chest Physician or family doctor. Routine tuberculin testing and, if necessary, B.C.G. vaccination (i.e. vaccination against tuberculosis) is provided for senior school children.

Certain special investigations are carried out in other types of illness by district health visitors, while health education is carried out by the County's medical and nursing staff.

- (i) Mental Health. The County Council has certain responsibilities in connection with the ascertainment of mental ill-health and mental deficiency, with the provision of statutory supervision, etc. for mental defectives living in the community, and with the provision of after-care following treatment for mental illness. The Mental Welfare Officer for the district works from the Health Area Office, Launceston.

II Education Department. As local Education Authority, the County Council is responsible for the School Health Service, which provides the following :-

Periodic Medical Inspection of pupils
Cleanliness Surveys of pupils
Dental Inspection and treatment of pupils
Ascertainment of handicapped pupils in need of special education
Treatment Clinic at the Castle, Bude:
Dental Clinics each Tuesday, Wednesday and Friday.
Child Guidance, by arrangement at Launceston Child Guidance Clinic

- III Welfare Department. This service is concerned with the welfare of the aged, and with that of various categories of handicapped persons. It is concerned also with the provision of temporary accommodation in certain circumstances for persons in urgent need thereof. The Welfare Officer for the District works from the Health Area Office, Launceston.

Hospital Services.

The South Western Regional Hospital Board is the hospital authority for the area.

Stratton Cottage Hospital provides in-patient and out-patient facilities in the district. Patients are referred also to hospitals in Plymouth and elsewhere. Cases of infectious disease are admitted to the Scott Hospital, Plymouth, and tuberculosis patients to Didworthy Hospital or Tehidy Chest Hospital. Mental hospital accommodation is provided by St. Lawrence's Hospital and Laninval House, Bodmin and Moorfields Hospital, Ivybridge, Devon.

An Orthopaedic Clinic is held weekly at Stratton Hospital, Bude and a Physiotherapy Clinic at Dawfield Hospital, Holsworthy. The Chest Clinic is held at Stratton Hospital. An Ophthalmic Clinic for school and pre-school children is held periodically at the Castle, Bude. A Specialist Ante-Natal Clinic is held in Launceston each week.

Laboratory Facilities

These are provided by the Public Health Laboratories at Exeter and Plymouth, to which specimens for bacteriological examination are submitted.

SANITARY CIRCUMSTANCES OF THE DISTRICT

WATER SUPPLIES. The District Water Undertaking passed under the control of the North Devon Water Board in October, 1967. This is therefore the first complete year during which that Authority has been responsible for the supply of water to the Urban District.

No major works in connection with the supply have been undertaken during the year. However, a new 6" main from Golf House Road to Hollabury, replacing the existing badly corroded 3" main supplying that area, was completed during the year. The preparation of this scheme had been completed by the Council's Water Engineer, but there had been no opportunity to implement it before the Undertaking passed from the control of the Council. The replacement of the old small dimension and much corroded main, by a new main of larger dimension, has greatly enhanced the supply of water to an area where shortages were experienced during the period of peak draw-off.

The Board also stabilised pressures in the low-lying parts of the District, by the introduction at Hillhead near the storage reservoir of a pressure reducing valve. This valve cut down the pressure in Bude by 100 feet head, thus conserving the higher pressures for parts of the District where they were needed, and at the same time obviating large fluctuations in Bude, with a consequent reduction of wastage from fittings operated by ball-valves.

In general the District experienced no major difficulties from shortage of supply, despite a drier than average summer.

Routine sampling for bacteriological examination is carried out by Officers of the North Devon Water Board, with occasional check samples by the Council's Public Health Inspector. The degree of purity of the water has remained, for the most part, of a high standard throughout the year. Those unsatisfactory reports which have been received have been dealt with promptly by the Board. They do, however, serve as an indication of the erratic character of the present method of chlorination, a point which has been made in previous reports. It is understood that the North Devon Water Board have this point very much in mind, and that it is intended to instal up-to-date chlorination plant at an early date. A summary of bacteriological reports is given below.

Summary of bacteriological reports

Tap water samples placed in Grade (Filtered and chlorinated)

<u>Class 1</u>	<u>Class 2</u>	<u>Class 3</u>	<u>Class 4</u>
78	10	-	2

SEWERAGE AND SEWAGE DISPOSAL

The scheme for the improvement of the sewerage of Bude, and the construction of the new submarine pipe-line and sea outfall at Crocklets has, regrettably, made little progress in tangible form. The existing facilities are being subjected to increasing pressure due to continuing residential development within the District, a position which is further aggravated by the fact that the sewage of Stratton now discharges into the Bude System. However, as a preliminary, certain minor schemes are being planned for the separation of surface and storm water from existing combined sewers, by the laying of separate new storm water sewers. One such scheme in the King Street area of Bude has been completed, and an extension of such works to other areas will bring considerable alleviation of the present position.

Initially, in instructing the consulting engineers to prepare a scheme for the proposed new submarine pipe-line and sea outfall at some 6,000 feet off-shore, the Council was advised that this would involve considerably less expenditure than an inland treatment works. It now appears, with the passage of time, that the increased cost of such a scheme would make the difference between its total cost and that of a treatment works minimal. For this reason, and also, it is understood, because of considerable difficulties which appear to have been experienced in the implementation of a similar scheme for which the Council's consulting engineers are responsible, within the District of another Local Authority, the Council met the consulting engineers in November to discuss the advisability of proceeding with the scheme as proposed, with the result that instructions have now been issued for the preparation of a scheme of disposal embracing treatment works, the effluent from which would be discharged direct via a sea outfall at a point to be decided. It is understood that if the cost of this scheme compares favourably with that for a submarine pipe-line, the Council will undoubtedly favour the treatment works.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

During the year the Council's trained Rodent Operator, whose contract had been renewed annually for the past three years after he had reached retirement age, left the service of the Council. His successor was appointed from within the existing establishment of manual workers. The appointment was made a month prior to the date of the old operator's retirement, in order that his successor could be with him, learn the methods of treatment and become reasonably familiar with the District. It was fortunate that the Ministry of Agriculture, Fisheries and Food instituted a Rodent Control Course for Beginners at this time, and following the retirement of the old operator, his successor was able to attend this course at Bodmin, and received considerable benefit from it.

Before his retirement, the former operator conducted an annual test baiting of the sewerage systems of the District, at which the new operator was able to be present. It was anticipated that some pockets of infestation would be found, since test baiting and treatment had not been performed for a considerable period. It is gratifying to be able to report that the results of this test were almost entirely negative.

In addition to the treatment of the sewerage systems, all other Council properties have received treatments, as well as private and business premises. Due to regular surveys and treatments the District continues to enjoy considerable freedom from infestation by rodents.

MOVEABLE DWELLINGS

Caravan Sites and Control of Development Act, 1960

There are at present in the District the following licensed sites :-

- (a) A small holiday site for 4 caravans, and for tented accommodation at Bush.
- (b) A holiday site for 30 caravans and 75 tents at Lynstone Farm
- (c) A residential site for 15 caravans at Maer Farm
- (d) A holiday site for 185 caravans, and for tented accommodation at Grenville Gate.

Of these sites, all but the first are provided with flush sanitation and main water supply. As the first is very small, and in a comparatively isolated area, the existing chemical closets were considered sufficient. All of the other sites now comply with the Ministry's Model Standards.

Taking the season as a whole the weather was very suitable for camping, and indeed for all holiday makers. In a year when other parts of the country were far less fortunate, the South Western peninsula enjoyed settled weather with prolonged periods of sunshine, and August in particular was an unusually dry and sunny month. As a consequence camping sites were filled to capacity, and there was a marked increase in tented camping. It was fortunate in the circumstances that the operator of site (d) had, during the close season, erected a new block of toilet facilities between his caravan site and the tented area. This block was completed before the height of the season, and gave a better distribution of the facilities to the tented campers.

Speaking generally, the operators of licensed sites continue to exhibit great keenness to maintain high standards, both in the provision of facilities, and in the general standard of cleanliness and hygiene.

Collection of refuse is carried out on site by the site operators, much of the combustible refuse being burnt immediately. The remainder of the refuse is collected by the Council's refuse lorry at times of collection normal to the respective sites. An exception occurs at site (d), where the operator conveys his refuse, collected in paper sacks, to the refuse tip in his own vehicles.

The operator of this site, having lost his appeal against the refusal of permission to extend his existing site by the erection of chalet type accommodation to the east of his existing camp, has now submitted a proposal to replace some of his older caravans, which are nearing the end of their useful life, with chalets. A decision on this application is still awaited.

During the season there was an increase in the amount of casual camping, but this was largely spasmodic, and no serious nuisances occurred.

PUBLIC CLEANSING

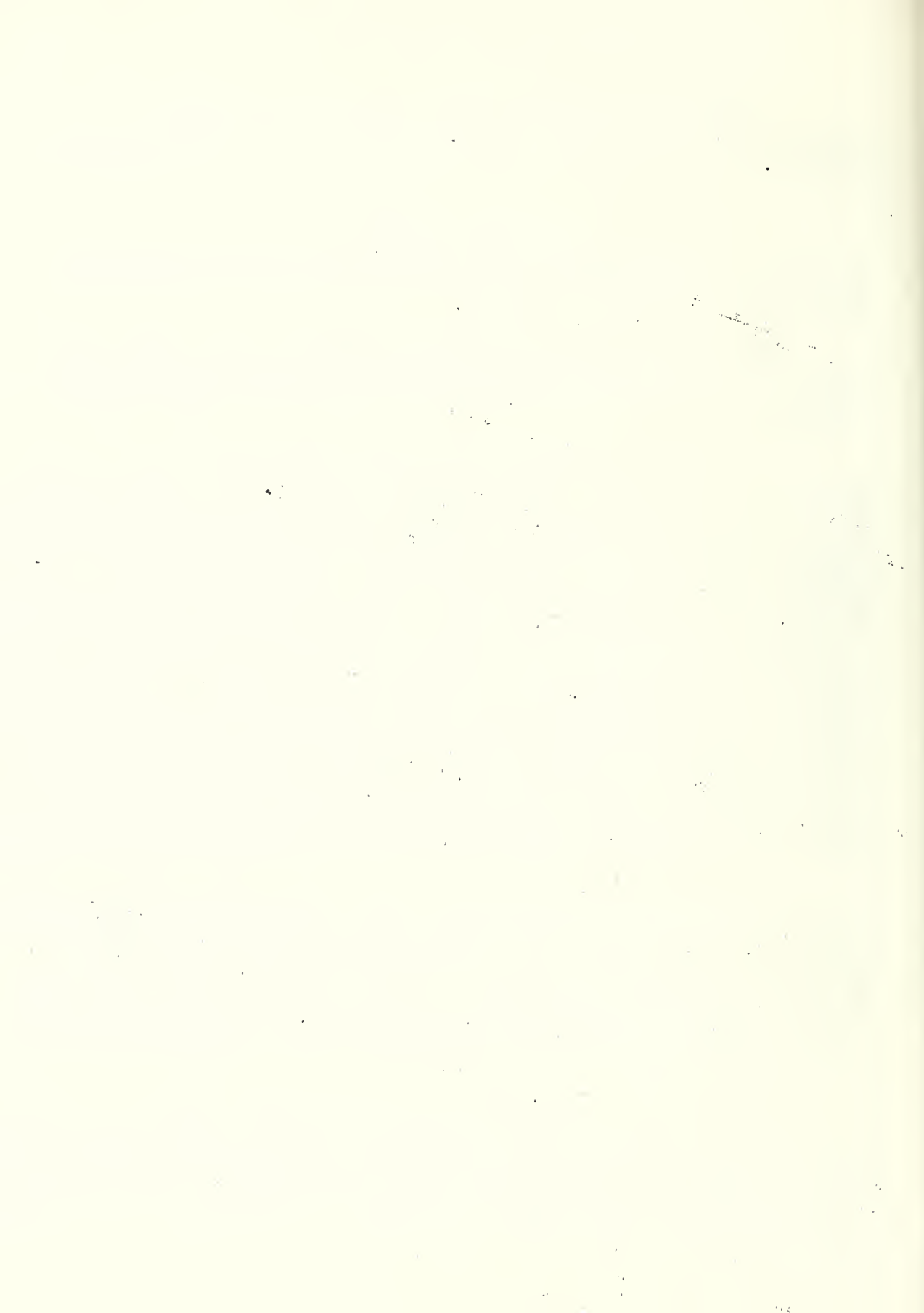
The Cornwall County Council control most of the roads in the District, but the work of street cleansing is carried out mainly by the staff of the Urban District Council.

As a result of an Organisation and Methods study, which took place early in the year, the responsibility for refuse collection and disposal passed from the control of the Surveyor to the Public Health Inspector.

The method of disposal of the refuse continues to be by tipping at the Tiscott Wood site. This tip is now filling up at a considerable rate during the summer months particularly, and although it has ample capacity for about another five years, if another layer is tipped above the existing tipping level, the difficulty and expense of obtaining suitable covering material is presenting an increasing problem. Added to this is an intermittent but considerable nuisance from fly breeding, despite continuous treatment by spraying with insecticides. As a consequence the Council has considered the advisability of converting to disposal by incineration, but no active steps in this direction have been taken to date. The disposal of refuse is a problem which is not peculiar to this Authority, and indeed a series of joint conferences has been held throughout the County on this subject; one such conference was held at Bude, with representatives from the County Health and County Planning Departments meeting officers of the Bude-Stratton Urban District Council, Stratton Rural District Council, Launceston Borough Council, Launceston Rural District Council and Camelford Rural District Council. A useful and informative discussion took place, but the consensus of opinion appeared to be that no immediate action was necessary.

Some difficulties have arisen, due to the implementation of the recommendations contained in the Organisation and Methods Study. This has restricted the number of personnel available for various duties in all departments, and has decreased considerably the manoeuvrability necessary for staff adjustments in the event of sickness or leave, since total staff under the recommendations covers only normal working. However, with the goodwill and co-operation of other departments, these difficulties have been, up to a point, offset.

An added difficulty which occurred during the season was the condition of the Council's refuse collection vehicle, a 16/18 cubic feet capacity fore and aft tipper. The busy period was marked by a series of breakdowns of the vehicle, necessitating removal from the road for repairs, and the hire of another vehicle for the collection, which involved considerable extra expense, and some disruption of the collection rounds.



However, steps have been taken to rectify these difficulties. A Sub-committee of the Public Health and Housing Committee selected, after demonstrations, a suitable vehicle of 24 cubic feet capacity, with intermittent compression gear, and an order had been placed for this vehicle by the end of the year. Delivery is likely to take up to five months, but it is hoped that the vehicle will be available for the summer season.

NATIONAL ASSISTANCE ACT

Section 47 - No action

Section 50 - No action

HOUSING

Once again some progress has been made in the Council's housing programme. The 18 one bedroomed bungalows for the elderly, the Warden's house and community/recreational block, and the 6 three bedroomed houses for general occupation had all been completed and occupied early in the year. The bungalows for the elderly in particular have been much appreciated by the occupants. In construction they are convenient, their arrangements for space heating and domestic hot water supply are efficient, and the special features for older people have been helpful. In addition the occupants are able to reach the shops and other facilities along reasonably level roads. It is to be hoped that this scheme, which is a new venture as far as the Council is concerned, will be extended in the near future. There is an obvious demand for specialised dwellings of this type.

Whilst the building programme for the current year had made little practical progress on site, two schemes had been prepared in detail :-

(a) A block of 16 flats for the elderly, built in two storeys, incorporating two flats on the ground floor for seriously disabled persons. This scheme is complementary to the completed 18 bungalows for the elderly on the same site, and is adjacent to the Warden's house and community centre.

(b) A continuation of the development of three bedroomed houses for general occupation at Berries Avenue, with 17 three bedroomed, four person houses, and 23 three bedroomed, five person houses. This scheme required further estate development, by way of the continuation of estate roads and the essential services.

At the end of the year the formal approval of the Ministry for these two schemes was awaited.

The slum problem is not a serious one numerically in the District, most unfit properties being dealt with individually when existing Council accommodation becomes available for re-housing the tenants. During the past few years, the position has also been eased by the improvement of many of the older houses either privately, or by means of standard grants, and undoubtedly the rate of improvement would increase if the Council were to consider

applications for discretionary grants. The situation would be further helped if the Council were to provide a limited number of houses for rehousing tenants in unfit properties.

Whilst the Council does not, at the moment, maintain a list of applicants for housing accommodation, there is still a need for this type of property. Vacancies are advertised in the local press, and the response to such advertisements indicates the extent of the need. It must be said, however, that this response is much more limited in the case of multi-storey flats, which do not seem to have a local appeal. It would appear that the Council might be wise to have second thoughts before embarking on any extension of this type of development.

In programming the future housing requirements of the District, the Council has very much in mind, not only the requirements of the local inhabitants, but also the possible demands of personnel brought into the District with the development of light industry, a development which appears to be imminent, and has, in fact, already started to a limited degree.

The trend towards increasing development of private owner-occupied dwelling houses has continued during the year. The private plots on the land at Berries Mount, developed by the Council for this purpose, have been taken up completely, and total development is imminent. In view of the success of this scheme the Council decided, subject to Planning Approval, to continue this type of development, as an extension of the existing site. At the moment of writing the approval for this additional residential development is awaited.

In addition, development of housing estates by building contractors, mainly from outside the District, continues. During the year laying of estate roads and main services was begun on a further three sites; at Ocean View Road, Moor Cross, Poughill, and Well, Poughill. These three estates, when fully developed, will provide approximately a further 150 units of accommodation, although the development is phased, and initially a total of 78 units will be erected.

Comparative table of private housing development

	<u>1968</u>	<u>1967</u>	<u>1966</u>	<u>1965</u>
Houses completed during the year	60	59	47	29
Houses being erected at end of year	35	31	37	29

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INSPECTION AND SUPERVISION OF FOOD

Food Premises and Clean Food

The number and types of premises in the District are :-

Grocers	...	...	...	...	...	...	12
Restaurants and hotel kitchens	...	...	...	...	...	...	45
Bakers and confectioners	...	...	...	...	...	...	5
Butchers	...	...	...	...	...	...	5
Dairies	...	...	...	...	...	...	5
Ice-cream dealers	...	...	...	...	...	...	25
Boarding houses	...	...	...	...	...	...	55
Greengrocers	...	...	...	...	...	...	10
School canteens	...	...	...	...	...	...	3

No. of inspections of registered food premises101

No. of inspections of other food premises187

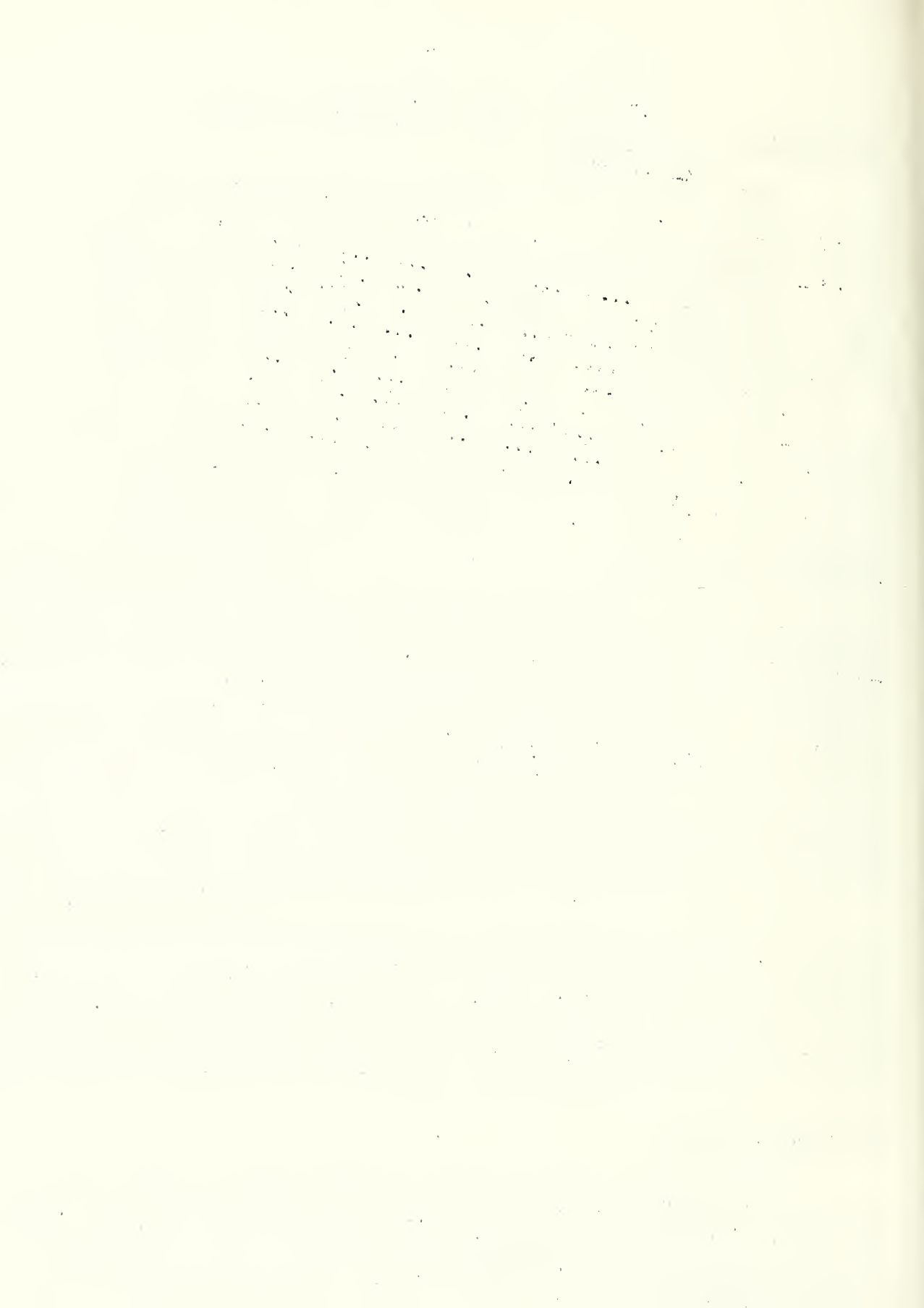
Food Hygiene Regulations

In a District where the most important industry, at the moment, is the holiday industry, the seasonal character of the demands upon the catering industry is its greatest problem. Largely almost at a standstill during the winter months, in the holiday season it is subjected to considerable pressures, which tend to build up as the season progresses. These pressures, together with the largely transient staffs which are available, create problems which, though not unique, are certainly not felt to any comparable extent in the centres of large population. Education in hygienic methods of food handling in lecture form, which could only take place in the off-season, has by then lost much of its interest for personnel who have found other employment, and perhaps may not return to the catering trade. In addition much imported labour is employed, and is likely to have left the District during the close season; this is particularly true of key personnel.

However, the Department does feel that prevention is better than cure, and inspections and advisory visits are an important part of the work of the year. Such visits have indicated that the larger the establishment the more vigilance is needed. This is, no doubt, in part explained by the relative remoteness of management staffs in such establishments. In spite of these difficulties, in general, good standards are maintained, and in other cases informal comment and advice have been generally acceptable to management staffs: no formal action has been necessary.

Milk.Brucella Abortus

By an arrangement with the County Medical Officer, samples of raw milk from producer-retailers in the area are taken by the County Public Health Inspector, and submitted to the Public Health Laboratory, Truro, for examination. Bulk samples are first subjected to the Milk Ring Test, and, if positive, samples from the individual cows in the herd are submitted for culture for brucella abortus.



(i) Number of samples of raw milk examined

Bulk samples - Milk Ring Test

5

(ii) Number of positive samples found

Nil

Meat Inspection

The Meat Inspection Regulations, 1963, came into force on 1st October, 1963. These Regulations impose upon local authorities the duty of inspecting all meat slaughtered within their areas, previous legislation having been permissive in this respect. They also empower local authorities to charge the operators of slaughterhouses for inspection, in accordance with a limiting scale. Under the Regulations, inspectors are required, as far as possible, to be present at the time of slaughter, and to mark all meat passed as fit for human consumption with an identifying stamp. Inspectors are also required to carry out the inspection in accordance with a detailed schedule of examination, this having previously been left to the discretion and experience of the inspector.

The management staff of the sole private slaughter-house in the District have maintained, with few exceptions which have been dealt with promptly, the standards required by the Slaughterhouse (Hygiene) Regulations, the Meat Inspection Regulations, the Food Hygiene (General) Regulations and the Slaughter of Animals (Prevention of Cruelty) Regulations.

In the work of securing compliance with these various Regulations, the Public Health Inspector has been assisted, as in previous years, by the inspection and advisory visits of the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food.

Meat inspection arrangements continue as for the previous year; that is to say between 70 and 80% of the work is carried out by local Veterinary Officers in private practice, and the remainder by the Council's Public Health Inspector. This arrangement has proved adequate and satisfactory.

It would seem, however, that if proposals for extending the slaughter-house to comply with the export requirements materialise, this system of inspection could well break down. Export inspection, under the export Regulations, would of necessity be carried out by the Veterinary Officers. Having extended the premises considerably, the Company would doubtless wish to utilise the facilities thus provided to the full extent. Elementary economics would demand that, when little or no export slaughtering was taking place, the facilities should be used as fully as possible for the home market, which would seem to indicate a big increase in this side of the business. It is extremely doubtful whether the present staff engaged on meat inspection would be sufficient, even if the Veterinary Officers were willing to accept the additional burden. This is a situation which the Council should have very much in mind.

The number of animals slaughtered during the year continued the downward trend of the past three years. Although more cows and other cattle, and pigs, were slaughtered, these did not fully compensate for the decreasing number of sheep, the throughput for which remained relatively low throughout the years, due, it is understood, to high market prices. Besides a decrease in actual numbers, the number of inspection units was also somewhat reduced. A table of comparative figures is given below.

	<u>1968</u>	<u>1967</u>	<u>1966</u>	<u>1965</u>
Cattle other than cows	838	459	361	438
Cows	333	175	174	277
Calves	118	144	134	129
Sheep and lambs	26,209	35,969	39,580	38,366
Pigs	11,466	8,100	9,230	13,214
	<hr/>	<hr/>	<hr/>	<hr/>
	38,964	44,847	49,479	52,407
	<hr/>	<hr/>	<hr/>	<hr/>
Meat Inspection Units	98,880	103,010	112,602	123,860

The continuing success of the scheme for the eradication of tuberculosis among cattle is underlined by the fact that there were no post-mortem manifestations of the disease in cattle throughout the year. Neither was there any case of cysticercosis.

Disposal of condemned meat and other foods

Condemned meat, both from the slaughterhouse and butchers' shops, is removed by a contractor, who sterilises and processes it, and converts it into animal feeding stuffs.

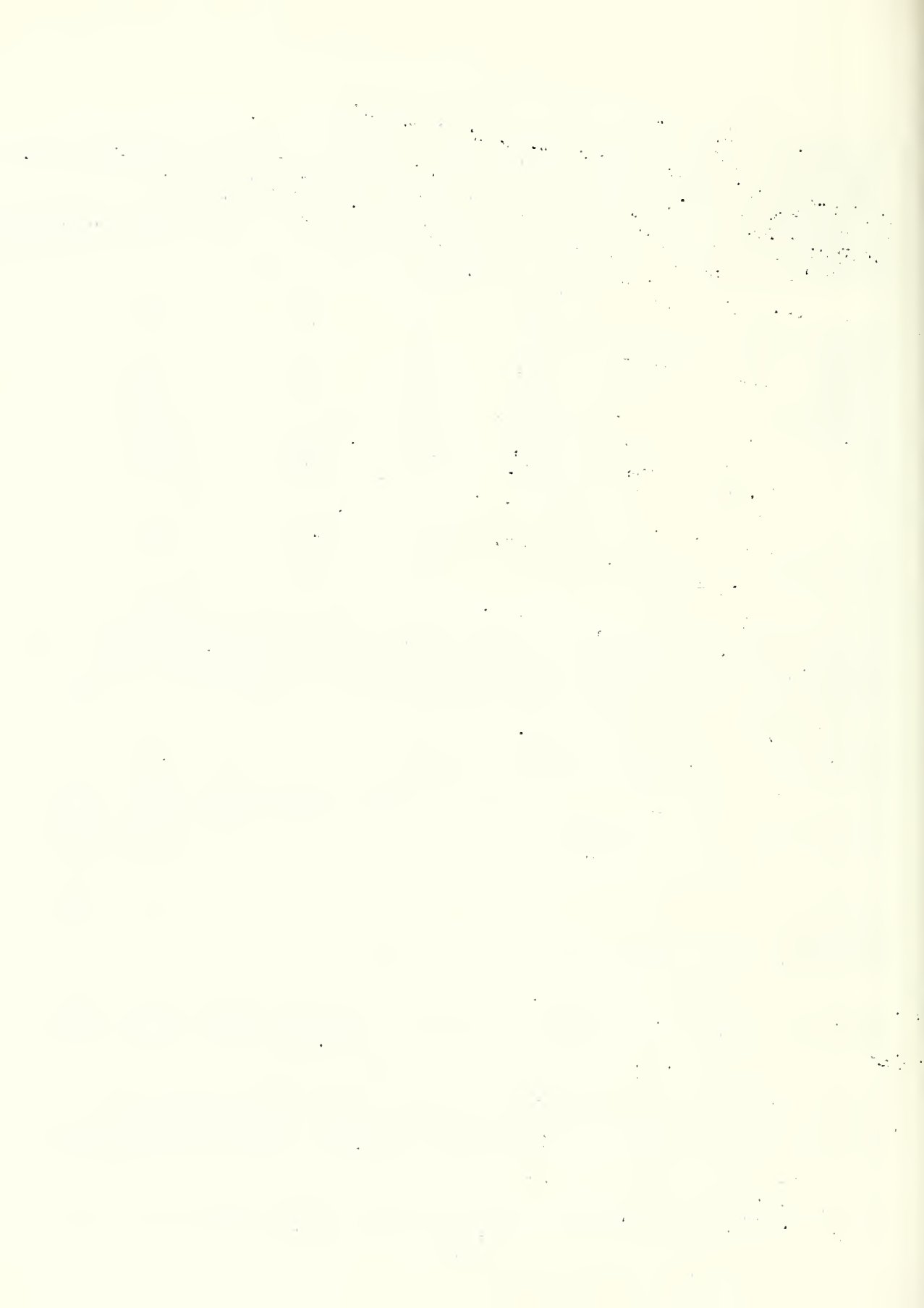
Tinned and similar goods are taken to the Council's refuse tip and buried.

Ice-cream (Heat Treatment) Regulations, 1959.

There are in the District 44 premises registered for the storage and sale of ice-cream. Of these 9 have not, during the year under review, sold the commodity, and one has closed down permanently.

Currently, no premises are registered for the manufacture of ice-cream, all supplies being obtained from manufacturers operating outside the District. Of these, two are Cornish Companies, and the remainder the nationally known firms.

New registration was granted in respect of 4 premises during the year, and all of these maintained 100% grade 1 samples.



The overall picture regarding laboratory reports on samples taken during the season was very satisfactory, showing a higher standard generally than that for 1966, which had the best record up to that date. No grade 4 results were recorded, and the number of grade 3 results was minimal. As in former years sampling was concentrated on the loose product, which is relatively much more susceptible to danger of contamination than the pre-packed variety.

Summary of results of samples - 1968

Provisional methylene blue test

Results in Grade one	-	72.05%
two	-	27.94 $\frac{5}{8}$
three	-	0.01%
four	-	Nil

FACTORIES ACT, 1961

Classified list of factories as at 31st December, 1968

<u>Nature of employment</u>	<u>Power</u>	<u>Non-power</u>
1. Food manufacture	3	-
2. Wearing apparel		
(a) Boots and shoes	3	-
(b) Outfitting	1	-
3. Carpentry, Joinery and saw mills	6	-
4. Garages repair shops and engineers	13	-
5. Laundries	-	-
6. Gas works	1	-
7. Monumental masons	-	1
8. Plumbers	-	2
9. Dairies	-	-
10. Photography	3	-
11. Printing works	2	-
12. Electrical engineers	2	1
13. Cabinet makers and upholsterers	-	2

Prescribed Particulars of the Factories Act, 1961, are attached as an appendix to this report in accordance with Circular 1/60 of the Ministry of Health

Summary of Public Health Inspector's inspections, etc.

This is shown in Table IV, page 24.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

The infectious diseases which are statutorily notifiable to the Medical Officer of Health are the following :- Cholera, plague, relapsing fever, typhus, smallpox, acute encephalitis, acute meningitis, acute poliomyelitis, anthrax, amoebic dysentery, bacillary dysentery, diphtheria, infective jaundice, leprosy, leptospirosis, malaria, measles, ophthalmia neonatorum, paratyphoid fever, typhoid fever, scarlet fever, tetanus, tuberculosis, whooping cough, yellow fever and food poisoning.

The monthly incidence of infectious disease is shown in Table III.

The Health Services and Public Health Act, 1968 and the Public Health (Infectious Diseases) Regulations, 1968, both of which came into operation on 1st October, 1968, made certain changes in the list of infectious diseases notifiable to the Medical Officer of Health. Some diseases, formerly subject to this procedure, were omitted i.e. erysipelas, acute primary pneumonia, acute influenzal pneumonia and puerperal pyrexia. Membranous croup, which is a form of diphtheria, although omitted by name, will still be covered by the general term "diphtheria". "Meningococcal infection" also omitted by name, is covered by "acute meningitis", which also includes this acute infection when caused by other organisms. Leptospirosis (a form of jaundice caused by a group of germs transmitted by certain animals e.g. rats and dogs), tetanus (lockjaw), and yellow fever are introduced for the first time. Yellow fever, an acute and serious infectious disease of certain areas of the tropics, transmitted to man by the bite of a type of mosquito, is not a disease which will be acquired in this country, but the speed of air travel makes it possible that the first signs of the disease may appear in a traveller from an infected region several days after arrival in this country. Dysentery becomes notifiable in its two distinct forms, amoebic, usually found in tropical and subtropical climates, and bacillary, the common variety in this country.

The remainder of the diseases on the list are unchanged. Food poisoning which was notifiable by virtue of Section 26 of the Food and Drugs Act, 1955, remains notifiable by the provisions of Section 48 of the Health Services and Public Health Act, 1968, which repealed the relevant section of the Food and Drugs Act.

Smallpox. No case was notified during the year, in the course of which 191 vaccinations and 27 re-vaccinations were carried out in the whole of the County Council's Health Area No. 6. It is not now possible to give these figures for individual county districts, owing to a new method of notifying such vaccinations. This applies also to the figures for vaccination against diphtheria, whooping cough and tetanus, poliomyelitis and measles, given below.

Diphtheria. No case of diphtheria was notified during the year. 537 children in the Health Area received a complete course of immunisation during the year, the triple antigen against diphtheria, whooping cough and tetanus being used in all cases. 55 children received reinforcing injections, the diphtheria-tetanus vaccine being used in these cases.

Measles. 39 cases were notified during the year, 35 of these occurring in January. One death from this disease was recorded. This appears to have been an overwhelming infection, in which there was, in the blood, an associated lack of a substance which, when present, plays an important part in overcoming infections.

During the year, the Ministry of Health introduced a scheme of vaccination against this disease, in order to attempt to forestall the bi-ennial epidemic expected. Vaccination was offered in the first instance to susceptible children between the ages of 4 and 7 years, and this was later extended to include such children up to the age of 11 years. The total number vaccinated in the whole of the Health Area during the year was 371.

Poliomyelitis. No case of this infection was notified during the year, in the course of which 664 persons in the Health Area received a complete course of oral vaccination, and a further 294 a reinforcing dose.

Dysentery. One case of this infection was notified in July. Two of the family contacts of this patient worked with food, and were excluded from work until bacteriological reports showed that they had not contracted the infection.

Food Poisoning. No cases were notified during 1968.

Tuberculosis

	<u>Males</u>		<u>Females</u>	
	<u>Pul.</u>	<u>Non-Pul.</u>	<u>Pul.</u>	<u>Non-Pul.</u>
Cases on Register 31.12.67	9	2	3	-
No. of cases notified during the year	1	1	-	-
Cases restored	-	-	-	-
Inward Transfers	-	-	-	-
Cases removed	3	-	-	-
<hr/>				
Total on Register 31.12.68	7	3	3	-

B.C.G. Vaccination continues to be offered to all susceptible contacts of known cases, most of whom avail themselves of this protection.

The scheme for B.C.G. Vaccination of susceptible senior school children was continued by the County Council during the year, again with a good response.

OTHER DISEASES

Cancer of the Lung During 1968, there were fifteen male and six female deaths from all forms of cancer. Eight male deaths were due to cancer of the lung. The total of deaths from this cause since 1949 is now 36 male and 11 female deaths. During the same period, there have been 126 male and 135 female deaths from all forms of cancer.

Cancer of the Cervix. The County Council's Cervical Cytology Clinic at Launceston continued to operate during the year.

Women between the ages of 30 and 55 are accepted for this form of examination. The clinic at Launceston serves the whole of the Health Area, and beyond. During the year, 253 specimens were submitted to the laboratory. No cases of the pre-cancerous stage of the disease, nor of established cancer of the cervix, were discovered, but a number of minor conditions were identified. As a copy of the laboratory report is sent to the patient's general practitioner, he is made aware of these findings, and can arrange treatment, if required.

The Cervical Cytology Clinic at Stratton Hospital continued to operate during the year. This is independent of the County Council's arrangements, and the figures above refer only to the County Council's clinic.

TABLE I

TUBERCULOSIS

Age and Sex Distribution of Cases and Deaths - 1968

<u>Age Groups</u>	<u>New Cases</u>				<u>Deaths</u>			
	<u>Pul.</u>		<u>Other</u>		<u>Pul.</u>		<u>Other</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0 -	-	-	-	-	-	-	-	-
1 -	-	-	-	-	-	-	-	-
5 -	-	-	-	-	-	-	-	-
15 -	-	-	-	-	-	-	-	-
20 -	-	-	-	-	-	-	-	-
25 -	-	-	-	-	-	-	-	-
35 -	-	-	-	-	-	-	-	-
45 -	1	-	-	-	1	-	-	-
55 -	-	-	-	-	-	-	-	-
65 and over	-	-	1	-	-	-	-	-
Age unknown	-	-	-	-	-	-	-	-

TABLE II

VITAL STATISTICS

Summary for Previous Years

	<u>Population (estimated)</u>	<u>Births</u>		<u>Deaths</u>			
		<u>Number</u>	<u>Crude Rate</u>	<u>Under 1 year</u>		<u>All ages</u>	
				<u>Number</u>	<u>Rate</u>	<u>Number</u>	<u>Rate</u>
4	5,110	56	10.958	1	17.857	72	14.09
5	5,160	76	14.728	1	13.15	82	15.89
6	5,200	71	13.65	2	28.169	107	20.57
7	5,210	67	12.9	-	-	87	16.7
8	5,280	63	11.9	1	16.0	95	18.0

TABLE III

Monthly Incidence of Notifiable Diseases (other than Tuberculosis)

	<u>Jan.</u>	<u>Feb.</u>	<u>Mar.</u>	<u>Apr.</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>Aug.</u>	<u>Sept.</u>	<u>Oct.</u>	<u>Nov.</u>	<u>Dec.</u>	<u>Total</u>
Measles	35	-	-	-	-	-	3	1	-	-	-	-	39
Dysentery	-	-	-	-	-	-	1	-	-	-	-	-	1
	35	-	-	-	-	-	4	1	-	-	-	-	40

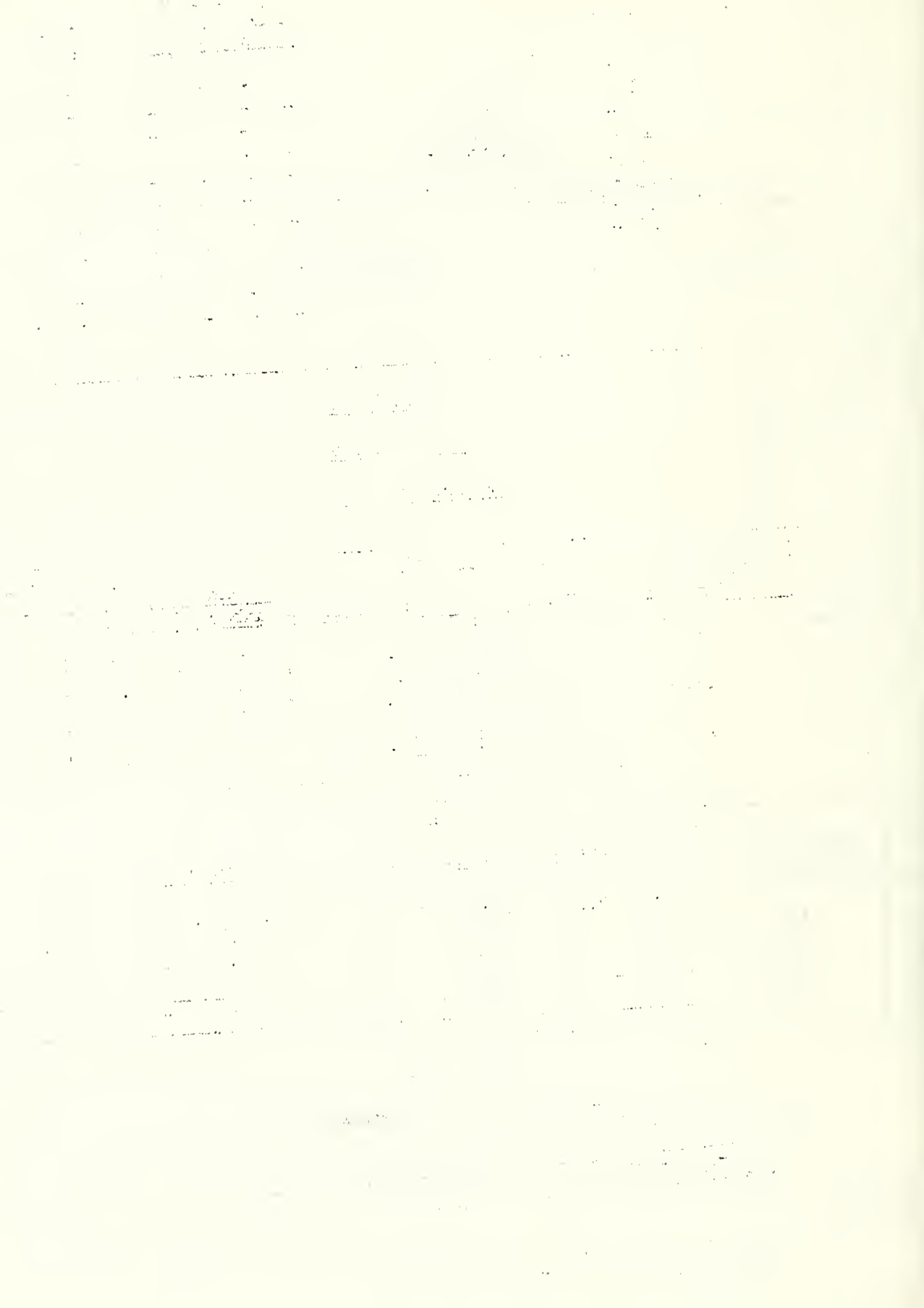


TABLE IV

Summary of Public Health Inspector's Inspections

Description	Number of visits	Number of defects found	Number remedied
Drainage	19	10	10
Keeping of animals	58	12	12
Swill boiling	2		
Public conveniences	257	23	23
Refuse disposal	72		
Rodent and pest control	37	9	9
Infectious diseases	15		
Petroleum Acts	7	1	1
Housing inspections	26	16	16
Local Authority housing inspections	250	27	27
Improvement Grants	69		
Camp sites	121	5	5
Factories	20	3	3
Offices Shops and Railway Premises Act	31	4	4
Meat inspection	204		
Foodshops	137	21	21
Bakehouses	2		
Food preparation premises	151	23	23
Licensed premises	10		
Ice-cream - sampling	66		
Ice-cream advisory, etc.	5		
Water supplies - sampling	4		
Water supplies - inspection	7		
Miscellaneous visits	52		

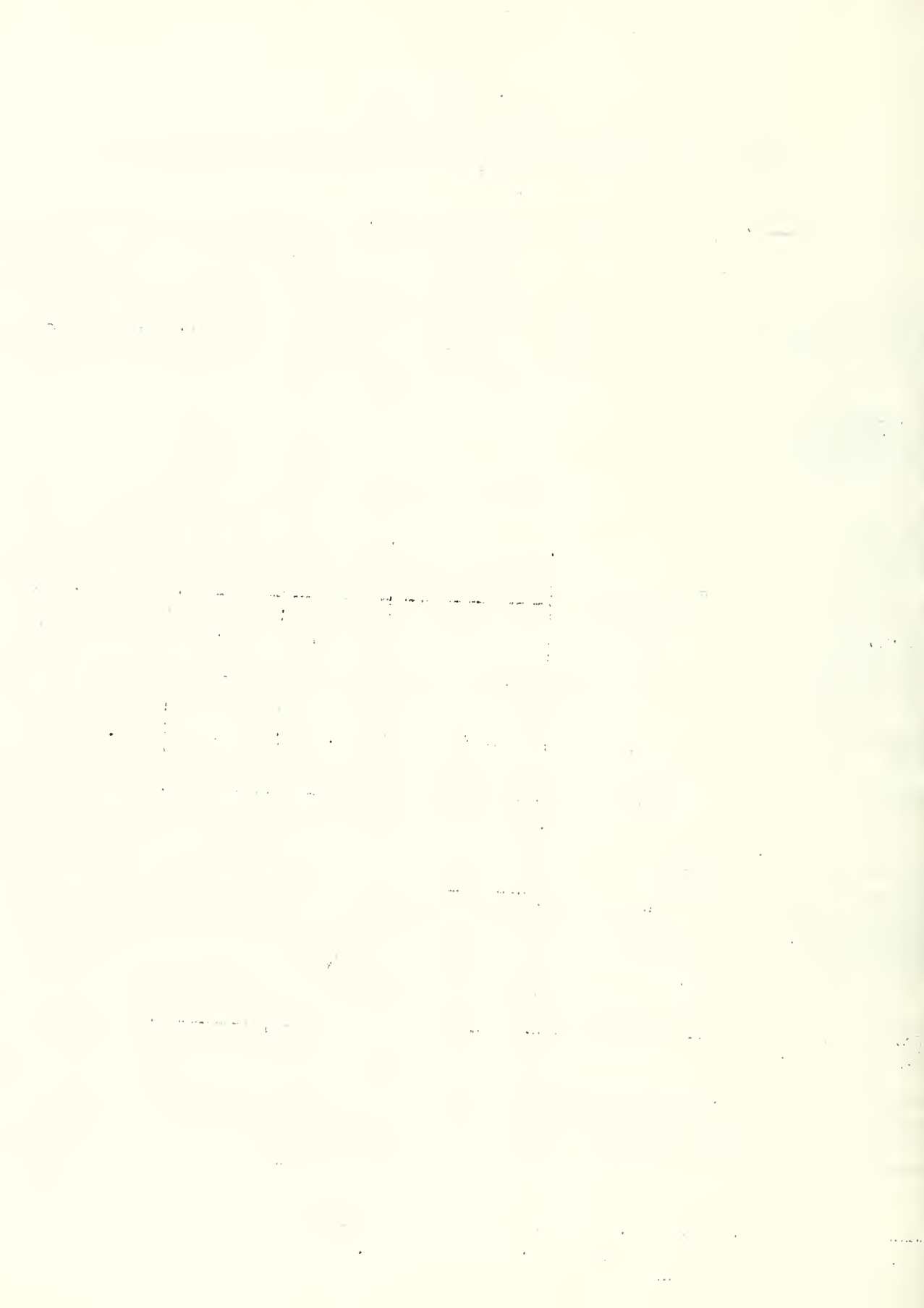
Total visits of all kinds made by the
Public Health Inspector during the year1,549

TABLE V

MEAT INSPECTION

Carcases and offal inspected and condemned in whole or in part

	Cattle excl. cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	838	333	118	26,209	11,466
Number inspected	838	333	118	26,209	11,466
<u>All diseases except tuberculosis and cysticercosis.</u> Whole carcasses condemned	3	18	6	99	33
Carcasses of which some part or organ was condemned	171	154	Nil	1,249	634
Percentage of number inspected affected with disease other than tuberculosis and cysticercosis	20.76%	51.65%	5.09%	5.14%	5.81%
<u>Tuberculosis only</u> Whole carcasses condemned	Nil	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil	58
Percentage of the number inspected affected with tuberculosis	Nil	Nil	Nil	Nil	0.50%
<u>Cysticercosis</u> Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil	Nil
Carcasses submitted to treatment by refrigeration	Nil	Nil	Nil	Nil	Nil
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil
Gross weight of meat condemned	23,170 lbs.				



APPENDIX

FACTORIES ACT, 1961.

Prescribed Particulars on the Administration of the
Factories Act, 1961.

Part 1 of the Act

1 - INSPECTIONS for purposes of Provisions as to health
(including inspections made by Public Health Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	6	3	-	-
ii) Factories not inclu- ded in (i) in which Section 7 is enforced by the Local Authority	33	17	-	-
ii) Other premises in which Section 7 is enforced by the Local Authority (exclu- ding out-workers' Premises)	1	-	-	-
Total	40	20	-	-

